

County: Pierce
 ELLSWORTH CARE CENTER
 403 N MAPLE ST

Facility ID: 7160

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ELLSWORTH 54011 Phone:(715) 273-5821
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/04): 60
 Total Licensed Bed Capacity (12/31/04): 60
 Number of Residents on 12/31/04: 51

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 52

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		39.2
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		41.2
Supp. Home Care-Household Services	No	Developmental Disabilities	2.0	Under 65	2.0	More Than 4 Years		19.6
Day Services	No	Mental Illness (Org./Psy)	21.6	65 - 74	7.8			-----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	41.2			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	7.8	65 & Over	98.0	-----		
Transportation	No	Cerebrovascular	7.8		-----	RNs		5.6
Referral Service	No	Diabetes	25.5	Gender	%	LPNs		9.9
Other Services	No	Respiratory	5.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	29.4	Male	43.1	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	56.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	1	2.9	151	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	2.0
Skilled Care	6	100.0	366	29	85.3	128	0	0.0	0	10	90.9	132	0	0.0	0	0	0.0	45	88.2
Intermediate	---	---	---	3	8.8	105	0	0.0	0	1	9.1	126	0	0.0	0	0	0.0	4	7.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	1	2.9	192	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	2.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	6	100.0		34	100.0		0	0.0		11	100.0		0	0.0		0	0.0	51	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	20.3	Bathing	0.0	66.7	33.3	51
Private Home/With Home Health	0.0	Dressing	3.9	88.2	7.8	51
Other Nursing Homes	0.0	Transferring	23.5	60.8	15.7	51
Acute Care Hospitals	79.7	Toilet Use	19.6	68.6	11.8	51
Psych. Hosp.-MR/DD Facilities	0.0	Eating	64.7	31.4	3.9	51
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0					
Total Number of Admissions	59	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		11.8
Private Home/No Home Health	33.8	Occ/Freq. Incontinent of Bladder	54.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	39.2	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	27.7	Mobility		Receiving Tube Feeding		2.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.9	Receiving Mechanically Altered Diets		33.3
Rehabilitation Hospitals	0.0			Other Resident Characteristics		
Other Locations	6.2	Skin Care		Have Advance Directives		88.2
Deaths	32.3	With Pressure Sores	0.0	Medications		
Total Number of Discharges		With Rashes	3.9	Receiving Psychoactive Drugs		64.7
(Including Deaths)	65					

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.3	88.5	0.94	89.0	0.94	90.5	0.92	88.8	0.94
Current Residents from In-County	94.1	80.0	1.18	81.8	1.15	82.4	1.14	77.4	1.22
Admissions from In-County, Still Residing	28.8	17.8	1.62	19.0	1.51	20.0	1.44	19.4	1.48
Admissions/Average Daily Census	113.5	184.7	0.61	161.4	0.70	156.2	0.73	146.5	0.77
Discharges/Average Daily Census	125.0	188.6	0.66	163.4	0.77	158.4	0.79	148.0	0.84
Discharges To Private Residence/Average Daily Census	42.3	86.2	0.49	78.6	0.54	72.4	0.58	66.9	0.63
Residents Receiving Skilled Care	90.2	95.3	0.95	95.5	0.94	94.7	0.95	89.9	1.00
Residents Aged 65 and Older	98.0	92.4	1.06	93.7	1.05	91.8	1.07	87.9	1.12
Title 19 (Medicaid) Funded Residents	66.7	62.9	1.06	60.6	1.10	62.7	1.06	66.1	1.01
Private Pay Funded Residents	21.6	20.3	1.06	26.1	0.83	23.3	0.93	20.6	1.05
Developmentally Disabled Residents	2.0	0.9	2.21	1.0	1.90	1.1	1.75	6.0	0.32
Mentally Ill Residents	21.6	31.7	0.68	34.4	0.63	37.3	0.58	33.6	0.64
General Medical Service Residents	29.4	21.2	1.39	22.5	1.31	20.4	1.44	21.1	1.40
Impaired ADL (Mean)	46.7	48.6	0.96	48.3	0.97	48.8	0.96	49.4	0.94
Psychological Problems	64.7	56.4	1.15	60.5	1.07	59.4	1.09	57.7	1.12
Nursing Care Required (Mean)	6.4	6.7	0.95	6.8	0.93	6.9	0.93	7.4	0.86